Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Des Main Document Page 1 of 58

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
CENTRAL DISTRICT OF CALIFORNIA		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Y	ourself			
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
1.	Your full name	•			
	Write the name your governmen picture identification to license or passion of the picture of the	nt-issued ation (for driver's sport). ure your	Gabriela First name Clopton Middle name Galindo Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)	
2.	All other name used in the las Include your ma maiden names.	at 8 years			
3.	Only the last 4 your Social Se number or fed Individual Tax Identification r (ITIN)	curity eral payer	xxx-xx-3981		

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Main Document Page 2 of 58 Case number (if known)

Debtor 1 Gabriela Clopton Galindo

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	1020 South Mountain Avenue, #26	If Debtor 2 lives at a different address:
		Monrovia, CA 91016 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Los Angeles	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Main Document Page 3 of 58 Case number (if known) Case 2:19-bk-14118-BB

Debtor 1 Gabriela Clopton Galindo

Pari	2: Tell the Court About	our Ba	nkruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				each, see Notice Required by age 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankrupto box.	су	
	choosing to file under	Chapter 7						
		☐ Ch	apter 11					
		☐ Ch	apter 12					
		☐ Ch	apter 13					
8.	How you will pay the fee		about how yo	u may pay. Typica attorney is submit	ally, if you are paying the fee yo	with the clerk's office in your local court for more de urself, you may pay with cash, cashier's check, or m lf, your attorney may pay with a credit card or check	oney	
					Iments. If you choose this option Official Form 103A).	n, sign and attach the Application for Individuals to F	Pay	
			ū	`	•	only if you are filing for Chapter 7. By law, a judge r	mav.	
		I	out is not requapplies to you	uired to, waive your family size and	ur fee, and may do so only if you you are unable to pay the fee in	ur income is less than 150% of the official poverty lin installments). If you choose this option, you must fill ial Form 103B) and file it with your petition.	e that	
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	i.					
			Debtor	-		Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No.	Go to li	ne 12.				
	residence?	■ Yes	Has yo	ur landlord obtain	ed an eviction judgment against	you?		
		. 30	_	No. Go to line 12				
			_		al Statement About an Eviction .	ludgment Against You (Form 101A) and file it with th	is	
				1 7 1				

Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Main Document Page 4 of 58 Case number (if known) Case 2:19-bk-14118-BB

Debtor 1 Gabriela Clopton Galindo

Par	Report About Any Bu	sinesses `	You Owr	n as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of bus	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Jumber Street City State & ZIB Code			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code			
	it to this petition.		Chec	k the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13. Are you filing under Chapter 11, the court must know whether you are a small business debtor so deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent be operations, cash-flow statement, and federal income tax return or if any of these documents do not in 11 U.S.C. 1116(1)(B).			a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure				
	For a definition of small	No.	lamı	not filing under Chap	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	4: Report if You Own or	Have Anv	Hazardo	ous Property or Any	y Property That Needs Immediate Attention		
	Do you own or have any				, ,		
•	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is	the hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number Street City State & Zin Code		
					Number, Street, City, State & Zip Code		

Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Case 2:19-bk-14118-BB Page 5 of 58 Case number (if known) Main Document

Debtor 1 **Gabriela Clopton Galindo**

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2	(Spouse	Only in a	Joint	Case):
-----------------------	---------	-----------	-------	--------

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Main Document Page 6 of 58

Part	6: Answer These Questi	ons for R						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily money for a business or i	y business debts? Business debts are debts investment or through the operation of the busi	that you incurred to obtain ness or investment.			
			☐ No. Go to line 16c.					
			Yes. Go to line 17.					
		16c.	State the type of debts yo	ou owe that are not consumer debts or busines	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Cha	pter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses		No					
	are paid that funds will be available for		☐ Yes					
	distribution to unsecured creditors?							
18	How many Creditors do	1-49		1 ,000-5,000	25,001-50,000			
	you estimate that you owe?	☐ 50-99	9	☐ 5001-10,000	☐ 50,001-100,000			
	OWE!	☐ 100-1 ☐ 200-9	* = =	□ 10,001-25,000	☐ More than100,000			
19.	How much do you	= \$0 - 5	\$50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		001 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			9,001 - \$500,000 9,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you	□ \$ 0 - :	\$50.000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities	•	,001 - \$100,000	☐ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion			
	to be?	□ \$100	0,001 - \$500,000	550,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion			
		\$500	0,001 - \$1 million	□ \$100,000,001 - \$500 million	LJ More than \$50 billion			
Par	t 7: Sign Below							
For	you	l have e	xamined this petition, and l	I declare under penalty of perjury that the inform	mation provided is true and correct.			
		If I have United S	chosen to file under Chap States Code. I understand t	ter 7, I am aware that I may proceed, if eligible the relief available under each chapter, and I cl	, under Chapter 7, 11,12, or 13 of title 11, hoose to proceed under Chapter 7.			
		If no atte docume	orney represents me and I ent, I have obtained and rea	did not pay or agree to pay someone who is not the notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankrup	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in these up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
			ela Clopton Galinda re of Debtor 1	Signature of Debto	or 2			
		Execute	ed on 4//// MM/DD/YYYY	Executed on MM	M/DD/YYYY			

Case 2:19- Debtor 1 Gabriela Clopton	·bk-14118-BB Galindo	Doc 1 Main Do	Filed 04/1: ocument	1/19 Entei Page 7 of -	red 04/1 58 Case num	11/19 09:56:06 Ober (if known)	Desc
For your attorney, if you are represented by one if you are not represented by an attorney, you do not need at this page.	under Chapter 7, 11, for which the person and, in a case in whi schedules filed with Signature of Autometer. D. Justin Harelik	12, or 13 of til is eligible. I a ch § 707(b)(4) the petition is i	le 11, United St Iso certify that I (D) applies, cer	ates Code, and h have delivered to	ave explain the debtor knowledge	ned the debtor(s) about ned the relief available u r(s) the notice required b after an inquiry that the	inder each chapter by 11 U.S.C. § 342(b)
	Printed name Westgate Law Firm name 16444 Paramoun Suite 205 Paramount, CA 9 Number, Street, City, State Contact phone (818) 236710 CA Bar number & State	0723 & ZIP Code		Email addre	ess j	justin@westgatelaw	r.com

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

No	and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).) The proceeding of the Bankruptcy Judge and court to whom assigned, the Bankruptcy Judge and court to whom assigned as a supplication and the Bankruptcy Judge and the Bankruptcy Judge and court to whom as a supplication and the Bankruptcy Judge and the Ba
2.	(If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
NC	one
3. N a	(If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
4.	Defended in the second month thorough has
	\ \ \ \ \ \ .
١d	eclare, under penalty of perjury, that the foregoing is true and correct.
E	xecuted at Los Angeles , California.
D	ate: Gabriela Clop f or Galindo Signature of Debtor 1

Signature of Debtor 2

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	Case	Z.13-0K-1411C		ment Page 9 of 58	3.30.00	Desc
Fill	in this informa	ation to identify your		meni Paue 9 01 56		
Del	btor 1	Gabriela Clopton	Galindo			
		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Bank	cruptcy Court for the:	CENTRAL DISTRICT O	CALIFORNIA		
Cas	se number					
	nown)				_	c if this is an
					amen	ded filing
\frown f	ficial For	m 106Cum				
		<u>m 106Sum</u> Your Assets:	and I iahilities an	d Certain Statistical Information	n	12/15
				are filing together, both are equally responsible		
info	rmation. Fill ou	ıt all of your schedul	es first; then complete th	e information on this form. If you are filing ame the box at the top of this page.		
		rize Your Assets	non cammary and onco.	the box at the top of the page.		
rai	rt 1: Summar	ize four Assets				
					Your a Value of	ssets of what you own
1.	Schedule A/E	3: Property (Official F	orm 106A/B)			
					\$	0.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$	6,950.00
	1c. Copy line	63, Total of all propert	y on Schedule A/B		. \$	6,950.00
Par	rt 2: Summar	rize Your Liabilities				
					Your li	abilities
						t you owe
2.			laims Secured by Property		\$	0.00
		•		he bottom of the last page of Part 1 of Schedule D	Ψ	0.00
3.			Unsecured Claims (Official 1 (priority unsecured claims	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of <i>Schedule E/F</i>	\$	59,541.00
				,	_	,
				Your total liabiliti	es \$	59,541.00
Par	rt 3: Summar	rize Your Income and	Expenses			
4.		our Income (Official Fo		,	\$	1,452.00
		·		I	. Ψ	.,.02.00
5.	Schedule J: Y Copy your mo	onthly expenses (Official on the community of the communi	l Form 106J) ne 22c of <i>Schedule J</i>		\$	1,415.00
Par	rt 4: Answer	These Questions for	Administrative and Statis	stical Records		
6.	-		er Chapters 7, 11, or 13?			
	☐ No. You	have nothing to report	on this part of the form. Ch	neck this box and submit this form to the court with	your other sch	nedules.
	Yes					
7.	What kind of	debt do you have?				

- - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Page 10 of 58 Case number (if known) Main Document

Debtor 1 Gabriela Clopton Galindo

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,450.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in Debtor			Main Document	Page 11 of 5	n	
Debtor	this inforn	mation to identify you	r case and this filing:			
DCDIO.	r 1	Gabriela Clopto	n Galindo			
		First Name	Middle Name	Last Name		
Debtor		First Name	Middle Nove	LastNama		
(Spouse		First Name	Middle Name	Last Name		
United	l States Ba	nkruptcy Court for the:	CENTRAL DISTRICT OF CALIFO	ORNIA		
Case	number					☐ Check if this is an
	_			-		amended filing
						-
Ott:	sial Ea	rm 1061/D				
		rm 106A/B				
Sch	nedul	e A/B: Pro _l	perty			12/15
think it i	fits best. Betion. If more every ques	e as complete and accu e space is needed, attac tion.	ibe items. List an asset only once. If a rate as possible. If two married people that a separate sheet to this form. On the one, Land, or Other Real Estate You Ow	e are filing together, both a e top of any additional pag	re equally responsible for s	upplying correct
rait i.	Describe	Lacii Residence, Bulluli	ng, Land, of Other Real Estate Tou Ow	ii oi nave an interest in		
1. Do y	ou own or h	nave any legal or equital	ble interest in any residence, building,	land, or similar property?		
■ N	o. Go to Par	t 2.				
□ Y _ℓ	es. Where is	s the property?				
	.					
Part 2:	Describe	Your Vehicles				
someoi		,	iolo, albo roport it ori corregule C. Es	recutory Contracts and U	nexpired Leases.	
	lo	•	utility vehicles, motorcycles	eculory Contracts and O	nexpired Leases.	
3. Cars	lo	ucks, tractors, sport	utility vehicles, motorcycles			claims or examptions. But
3. Cars □ N ■ Y	lo es Make: <u>I</u>	ucks, tractors, sport (•		Do not deduct secured of the amount of any secured	claims or exemptions. Put red claims on <i>Schedule D</i> :
3. Cars □ N ■ Y 3.1	do des Make:	ucks, tractors, sport of the sp	Who has an interest in the		Do not deduct secured of the amount of any secured	
3. Cars □ N ■ Y 3.1	Make: I Model: Year: 2	ucks, tractors, sport of the sp	Who has an interest in the Debtor 1 only	e property? Check one	Do not deduct secured of the amount of any secured control of the Current value of the	red claims on Schedule D: aims Secured by Property. Current value of the
3. Cars □ N ■ Y 3.1	do des Make:	Honda CRV 2000 e mileage:	Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o	e property? Check one	Do not deduct secured the amount of any secured Creditors Who Have Cla	red claims on Schedule D: aims Secured by Property.
3. Cars □ N ■ Y 3.1	Make: Model: Year: Approximate	Honda CRV 2000 e mileage: nation:	Who has an interest in the Debtor 1 only	e property? Check one	Do not deduct secured of the amount of any security of the Control of the entire property?	red claims on Schedule D: nims Secured by Property. Current value of the portion you own?
3. Cars □ N ■ Y 3.1	Make: Model: Year: Approximate Other inform	Honda CRV 2000 e mileage: nation:	Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is commu	e property? Check one only ors and another	Do not deduct secured of the amount of any secured control of the Current value of the	red claims on Schedule D: aims Secured by Property. Current value of the
3. Cars □ N ■ Y 3.1	Make: Model: Year: Approximate Other inform	Honda CRV 2000 e mileage: nation:	Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 o At least one of the debtor	e property? Check one only ors and another	Do not deduct secured of the amount of any security of the Control of the entire property?	red claims on Schedule D: nims Secured by Property. Current value of the portion you own?
3. Cars □ N ■ Y 3.1 4. Wate Exam □ N □ Y 5 Add pag	Make: I Make: I Model: Year: I Model: Year: I Model: I Mo	Honda CRV 2000 e mileage: mation: ull rcraft, motor homes, ts, trailers, motors, per ar value of the portion ave attached for Part	Who has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is communicated in you own for all of your entries from 2. Write that number here	e property? Check one only ors and another unity property cles, other vehicles, and owmobiles, motorcycle ac	Do not deduct secured the amount of any securic Creditors Who Have Classification Current value of the entire property? \$2,000.00 diaccessories ccessories	red claims on Schedule D: aims Secured by Property. Current value of the portion you own?

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Case 2:19-bk-14118-BB Page 12 of 58 Case number (if known) Main Document Debtor 1 **Gabriela Clopton Galindo** Yes. Describe..... \$2,500.00 Misc. household furnishings, electronics, etc. 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$750.00 Misc. Electronics 8. Collectibles of value Examples: Antiques and figurines: paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Personal Clothing \$800.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$200.00 Misc. Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4,250.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets

Official Form 106A/B

Schedule A/B: Property

portion you own?
Do not deduct secured

Current value of the

page 2

Do you own or have any legal or equitable interest in any of the following?

	Case 2:19-bk-14118-BI		1/19 Entered 04/11/19 09	:56:06 Desc
Debtor 1	Gabriela Clopton Galindo	Main Document	Page 13 of 58 Case number (if known)	·
□ No	mples: Money you have in your waller		box, and on hand when you file your petit	claims or exemptions.
			Cash on hand Refund of \$5,000 \$500 cash; \$1,200 attorney, \$2,000 spent on family expenses/eme rgencies	\$500.00
Exa	institutions. If you have multip	nancial accounts; certificates of do le accounts with the same institut Institution nam		houses, and other similar
	17.1.	Checking ac	count at Chase Bank	\$200.00
Exa ■ No □ Ye	es Institutio	unts with brokerage firms, money on or issuer name:	market accounts orated businesses, including an intere	st in an LLC, partnership, anc
				., ,
■ No	ot venture o es. Give specific information about the Name of ent		% of ownership:	

Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

☐ Yes. List each account separately.

Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No

☐ Yes. Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

☐ Yes...... Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

page 3

Debtor 1	Gabriela Clopton Galindo	Main Document	Page 14 of 58 Case number ((if known)
■ No				
■ No □ Yes	Institution name and de	scription. Separately file the r	ecords of any interests.11 U.S.C.	§ 521(c):
25. Trusts , ■ No	equitable or future interests in pro	perty (other than anything li	sted in line 1), and rights or po	wers exercisable for your benefit
☐ Yes.	Give specific information about them.			
	s, copyrights, trademarks, trade sec ples: Internet domain names, websites			
☐ Yes.	Give specific information about them.			
Examp	es, franchises, and other general in oles: Building permits, exclusive licens		oldings, liquor licenses, profession	nal licenses
■ No □ Yes.	Give specific information about them.			
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax ref □ No	unds owed to you			
_	Give specific information about them,	including whether you already	filed the returns and the tax year	S
	Та	x refund was received p	rior to filing	\$0.00
■ No	support oles: Past due or lump sum alimony, sp Give specific information	pousal support, child support,	maintenance, divorce settlement,	property settlement
	amounts someone owes you bles: Unpaid wages, disability insurand benefits; unpaid loans you made		s, sick pay, vacation pay, workers	s' compensation, Social Security
	Give specific information			
	ts in insurance policies oles: Health, disability, or life insurance	e; health savings account (HS	A); credit, homeowner's, or renter	's insurance
	Name the insurance company of each Company name		Beneficiary:	Surrender or refund value:
If you a	erest in property that is due you from the beneficiary of a living trust, exponen has died.		ance policy, or are currently entitle	ed to receive property because
☐ Yes.	Give specific information			
Examp	against third parties, whether or no oles: Accidents, employment disputes,			
■ No □ Yes.	Describe each claim			
34. Other o □ No	contingent and unliquidated claims	of every nature, including c	ounterclaims of the debtor and	rights to set off claims
	Describe each claim			
Official Forn	n 106A/B	Schedule A/B: Prop	perty	page

Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Case 2:19-bk-14118-BB

Debtor 1

Gabriela Clopton Galindo

Main Document

Page 15 of 58
Case number (if known)

Debtor has a pending worker's compensation case. Anticipated recovery is speculative and unknown but in any event, the recovery will be based on future support requirements associated with this injury, and will therefore be entirely exempt. Debtor is represented by Wachtel Law; (323) 464-6400

\$0.00

35. Any financial assets you did not already list			
■ No			
\square Yes. Give specific information			
36. Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here			\$700.00
Part 5: Describe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	Late in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related	d property?		
No. Go to Part 6.			
☐ Yes. Go to line 38.			
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You of If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. Do you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
■ No. Go to Part 7.			
☐ Yes. Go to line 47.			
Part 7: Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53. Do you have other property of any kind you did not already list? <i>Examples:</i> Season tickets, country club membership			
■ No			
☐ Yes. Give specific information		_	
54. Add the dollar value of all of your entries from Part 7. Write tha	nt number here		\$0.00
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$0.00
56. Part 2: Total vehicles, line 5	\$2,000.00		
57. Part 3: Total personal and household items, line 15	\$4,250.00		
58. Part 4: Total financial assets, line 36	\$700.00		
59. Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54	\$0.00		
62. Total personal property. Add lines 56 through 61	\$6,950.00	Copy personal property tot	al \$6,950.00
63. Total of all property on Schedule A/B . Add line 55 + line 62			\$6,950.00

page 5 Official Form 106A/B Schedule A/B: Property

	Maill Doul	mem Page 10	UL 30	
nation to identify your	case:			
Gabriela Clopton	Galindo			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
nkruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
				Check if this is an amended filing
	Gabriela Clopton First Name First Name	Gabriela Clopton Galindo First Name Middle Name First Name Middle Name	Gabriela Clopton Galindo First Name Middle Name Last Name First Name Middle Name Last Name	Gabriela Clopton Galindo First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemp	otions are	you claiming?	Check one only	, even if	your spouse is	filing with	you.
----	--------------------	------------	---------------	----------------	-----------	----------------	-------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2000 Honda CRV Paid in full	\$2,000.00		\$2,000.00	C.C.P. § 703.140(b)(2)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Misc. household furnishings, electronics, etc.	\$2,500.00		\$2,500.00	C.C.P. § 703.140(b)(3)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Misc. Electronics Line from Schedule A/B: 7.1	\$750.00		\$750.00	C.C.P. § 703.140(b)(3)
Ente from Goriodale 702.			100% of fair market value, up to any applicable statutory limit	
Personal Clothing Line from Schedule A/B: 11.1	\$800.00		\$800.00	C.C.P. § 703.140(b)(3)
Zino nom osinodato 702. TTT			100% of fair market value, up to any applicable statutory limit	
Misc. Jewelry Line from Schedule A/B: 12.1	\$200.00		\$200.00	C.C.P. § 703.140(b)(4)
Ellic Holli Golleddio FVD. 12:1			100% of fair market value, up to any applicable statutory limit	

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Main Document Page 17 of 58 **Gabriela Clopton Galindo** Debtor 1 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash on hand C.C.P. § 703.140(b)(5) \$500.00 \$500.00 Refund of \$5,000 100% of fair market value, up to \$500 cash; \$1,200 attorney, \$2,000 spent on family any applicable statutory limit expenses/emergencies Line from Schedule A/B: 16.1 **Checking account at Chase Bank** C.C.P. § 703.140(b)(5) \$200.00 \$200.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Debtor has a pending worker's C.C.P. § 703.140(b)(11)(D) \$26,800.00 \$0.00 compensation case. Anticipated recovery is speculative and unknown 100% of fair market value, up to but in any event, the recovery will be any applicable statutory limit based on future support requirements associated with this injury, and will therefore be entirely exempt. Debtor is repr Line from Schedule A/B: 34.1 Debtor has a pending worker's C.C.P. § 703.140(b)(5) \$0.00 \$27,525.00 compensation case. Anticipated recovery is speculative and unknown 100% of fair market value, up to but in any event, the recovery will be any applicable statutory limit based on future support requirements associated with this injury, and will therefore be entirely exempt. Debtor is repr Line from Schedule A/B: 34.1 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

Official Form 106C

No

Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Fill in this infor	rmation to identify your	case:		
Debtor 1	Gabriela Clopton			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	CENTRAL DISTRICT C	F CALIFORNIA	
Case number				
(II KIIOWII)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Case	2:19-bK-14118	_	oc 1 - Filed (ain Documer	04/11/19 ot Dogg	Entered 04/11/19 2 19 of 58	9 09:56:00	b Desc
Fill	in this inform	ation to identify your o		iiii Documei	II Paul	: 19 UL 30		
	tor 1							
Den	IOI I	Gabriela Clopton First Name	Middle N	lame	Last Name			
Deb	tor 2							
(Spot	use if, filing)	First Name	Middle N	lame	Last Name			
Unit	ed States Ban	kruptcy Court for the:	CENTRAL	DISTRICT OF CA	LIFORNIA			
Cas	e number							
(if kno				_			□ C	heck if this is an
							aı	mended filing
⊃ff:	icial Form	106E/E						
			ha Haya	Uncopura	d Claima			12/15
		F: Creditors W				Part 2 for creditors with NON	DDIODITY .I.'	
Sche eft. <i>F</i>	dule D: Credito Attach the Cont and case num	rs Who Have Claims Seci inuation Page to this pag	ured by Prope e. If you have	rty. If more space is no information to r	s needed, copy	any creditors with partially s the Part you need, fill it out, i do not file that Part. On the to	number the ent	tries in the boxes on the
1.	Do any credito	rs have priority unsecured	d claims again	st you?				
	No. Go to Pa	art 2.						
	☐ Yes.							
Part	2: List All	of Your NONPRIORIT	Y Unsecured	d Claims				
3.	Do any credito	rs have nonpriority unsec	ured claims a	gainst you?				
	☐ No. You have	e nothing to report in this pa	art. Submit this	form to the court wit	th your other sche	edules.		
	Yes.							
1	unsecured claim	, list the creditor separately	/ for each claim	. For each claim liste	ed, identify what t	b holds each claim. If a credite type of claim it is. Do not list cla three nonpriority unsecured cl	aims already inc	luded in Part 1. If more
								Total claim
4.1	Cach Llo	/resurgent Cap		Last 4 digits of ac	count number	1252		\$5,226.00
		Creditor's Name		When was the del	h4 in accordad 2	Onened 02/46		
		urgent Capital Servi lle, SC 29602	ces	When was the de	ot incurred?	Opened 03/16		-
		reet City State Zip Code		As of the date you	u file, the claim i	s: Check all that apply		
	Who incur	red the debt? Check one.						
	■ Debtor	1 only		☐ Contingent				
	☐ Debtor 2	2 only		☐ Unliquidated				
	☐ Debtor	1 and Debtor 2 only		☐ Disputed				
	☐ At least	one of the debtors and and	other	Type of NONPRIC	ORITY unsecured	d claim:		
		f this claim is for a comm	nunity	☐ Student loans				
	debt Is the clain	n subject to offset?		□ Obligations arise report as priority cl		ration agreement or divorce th	at you did not	
	■ No	•				g plans, and other similar debt	S	
	☐ Yes					Company Account Wel		
				Canon. Opcomy		• •		

Page 20 of 58 Case number (if known) Main Document Debtor 1 Gabriela Clopton Galindo 4.2 \$5,052.00 Cavalry Portfolio Serv Last 4 digits of account number 3521 Nonpriority Creditor's Name 500 Summit Lake Drive When was the debt incurred? **Opened 03/17** Valhalla, NY 10595 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Citibank ☐ Yes 4.3 **Cavalry Portfolio Serv** \$452.00 Last 4 digits of account number 0638 Nonpriority Creditor's Name 500 Summit Lake Drive When was the debt incurred? **Opened 02/17** Valhalla, NY 10595 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collection Attorney Synchrony Bank** 4.4 **Chase Card** Last 4 digits of account number \$5,700.00 6633 Nonpriority Creditor's Name Opened 09/14 Last Active Po Box 15369 When was the debt incurred? 5/19/16 Wilmington, DE 19850 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No
□ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Credit Card

 \square Obligations arising out of a separation agreement or divorce that you did not

lacksquare Debts to pension or profit-sharing plans, and other similar debts

Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Case 2:19-bk-14118-BB Main Document

 $\begin{array}{c} \text{Page 21 of 58} \\ \text{Case number (if known)} \end{array}$ Debtor 1 Gabriela Clopton Galindo

4.5	Chase Card	Last 4 digits of account number	0960	\$4,653.00
	Nonpriority Creditor's Name		Opened 09/12 Last Active	
	Po Box 15369 Wilmington, DE 19850	When was the debt incurred?	3/08/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	<u> </u>	
4.6	Chase Card	Last 4 digits of account number	9029	\$1,359.00
	Nonpriority Creditor's Name		0	
	Po Box 15369	When was the debt incurred?	Opened 06/13 Last Active 2/14/16	
	Wilmington, DE 19850	When was the dept incurred:	2/14/10	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.7	Chase Card	Last 4 digits of account number	4721	\$804.00
	Nonpriority Creditor's Name	_		· · · · · · · · · · · · · · · · · · ·
	Po Box 15369	W/	Opened 10/13 Last Active	
	Wilmington, DE 19850	When was the debt incurred?	2/07/16	
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	

Debtor 1 Gabriela Clopton Galindo

Main Document Page 22 of 58
Case number (if known)

4.8	Citicards Cbna	Last 4 digits of account number	5427	\$602.00
	Nonpriority Creditor's Name	_	Opened 12/14 Last Active	
	Po Box 6217	When was the debt incurred?	Opened 12/14 Last Active 12/28/15	
	Sioux Falls, SD 57117 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam	S. Oncok all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	<u> </u>	
4.9	Discover Fin Svcs Llc	Last 4 digits of account number	9694	\$1,415.00
	Nonpriority Creditor's Name	_		
	Po Box 15316		Opened 10/12 Last Active	
	Wilmington, DE 19850	When was the debt incurred?	1/27/16	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	■ Other Specify Credit Card	i	
4.1 0	Lvnv Funding Llc	Last 4 digits of account number	6626	\$927.00
	Nonpriority Creditor's Name C/o Resurgent Capital Services Greenville, SC 29602	When was the debt incurred?	Opened 01/17	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify N.A.	Company Account Capital One	

Debtor 1 Gabriela Clopton Galindo

Main Document Page 23 of 58
Case number (if known)

4.1 1	Lvnv Funding Llc	Last 4 digits of account number	3001	\$806.00
	Nonpriority Creditor's Name C/o Resurgent Capital Services Greenville, SC 29602	When was the debt incurred?	Opened 06/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Factoring (Bank N.A.	Company Account Credit One	
4.1 2	Macys/dsnb	Last 4 digits of account number	5680	\$3,905.00
	Nonpriority Creditor's Name		Opened 03/11 Last Active	
	Po Box 8218 Mason, OH 45040	When was the debt incurred?	7/20/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1 3	Midland Funding	Last 4 digits of account number	2163	\$3,934.00
	Nonpriority Creditor's Name 2365 Northside Dr Ste 30 San Diego, CA 92108	When was the debt incurred?	Opened 02/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane, and other similar debts	
	■ No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify Bank	Company Account Synchrony	

Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Case 2:19-bk-14118-BB

Page 24 of 58 Case number (if known) Main Document Debtor 1 Gabriela Clopton Galindo

Midland Funding	Last 4 digits of account number	6920	\$3,431.00
Nonpriority Creditor's Name	_		
2365 Northside Dr Ste 30 San Diego, CA 92108	When was the debt incurred?	Opened 02/16 Last Active 5/31/16	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Bank	Company Account Synchrony	
Midland Funding	Last 4 digits of account number	6032	\$1,907.00
Nonpriority Creditor's Name 2365 Northside Dr Ste 30 San Diego, CA 92108	When was the debt incurred?	Opened 01/17	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Bank	Company Account Synchrony	
National Credit Adjust	Last 4 digits of account number	4199	\$5,095.00
Nonpriority Creditor's Name 327 W 4th Ave Hutchinson, KS 67501	When was the debt incurred?	Opened 07/17	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only			
☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other, Specify Factoring (Company Account Netcredit	

Debtor 1 Gabriela Clopton Galindo

Main Document Page 25 of 58
Case number (if known)

4.1 7	Portfolio Recov Assoc	Last 4 digits of account number	9828	\$6,259.00			
	Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502	When was the debt incurred?	Opened 02/16				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Bank					
4.1 3	Portfolio Recov Assoc	Last 4 digits of account number	6899	\$2,862.00			
	Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502	When was the debt incurred?	Opened 04/16				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Bank	Company Account Synchrony				
4.1 9	Portfolio Recov Assoc	Last 4 digits of account number	5443	\$1,675.00			
	Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 Norfolk, VA 23502	When was the debt incurred?	Opened 01/17				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Debtor 1 and Debtor 2 only ☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Tactoring C Bank	Company Account Synchrony				

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Page 26 of 58 Case number (if known) Main Document Debtor 1 Gabriela Clopton Galindo 4.2 \$888.00 **Portfolio Recov Assoc** 0322 Last 4 digits of account number 0 Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? **Opened 06/16** Norfolk, VA 23502 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Factoring Company Account Citibank N.A. ☐ Yes 4.2 **Portfolio Recov Assoc** 1677 \$353.00 Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Blvd Ste 1 When was the debt incurred? **Opened 10/16** Norfolk, VA 23502 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Synchrony** ☐ Yes Other. Specify Bank

Td Bank Usa/targetcred 8573 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/14 Last Active Po Box 673 When was the debt incurred? 7/27/16 Minneapolis, MN 55440 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

4.2

\$1,976.00

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Page 27 of 58 Case number (if known) Main Document

Debtor 1 Gabriela Clopton Galindo

Uscb America	Last 4 digits of account number	8827	\$260.00			
Nonpriority Creditor's Name 355 S Grand Ave Ste 3200 Los Angeles, CA 90071	When was the debt incurred?	Opened 11/18				
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
Who incurred the debt? Check one.						
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
☐ Yes	Other. Specify Collection A Scal	Attorney Kaiser Permanente				

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

T. (. | O| .) . .

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		0.00
		you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 59,541.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 59,541.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		Maiii Docu	meni Pauezouiso	
Fill in this infor	mation to identify your	case:		
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		CENTRAL DISTRICT C	F CALIFORNIA	
Case number (if known)				☐ Check if this is an

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	-

=::: 41:		Main Docum	ent Page 29	9 of 58	
Fill in this	information to identify your	case:			
Debtor 1	Gabriela Cloptor First Name	Galindo Middle Name	Last Name		
Debtor 2	First Name	wilddie Name	Last Name		
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	CENTRAL DISTRICT OF C	CALIFORNIA		
Case numb	er				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	obtors			40/45
Scried	ule II. Toul Cou	EDIOIS			12/15
I. Do y No Yes 2. With Arizona No. Yes.	and case number (if known ou have any codebtors? (If in the last 8 years, have you, California, Idaho, Louisiana Go to line 3.	boxes on the left. Attach the land the	not list either spouse a erty state or territory o Rico, Texas, Washin	as a codebtor. ? (Community property sta	
	In which community stat	e or territory did you live?	California	Fill in the name and co	urrent address of that person.
	Name of your spouse, former sp Number, Street, City, State & Zi				
in line Form 1 out Co	2 again as a codebtor only	if that person is a guarantor I Form 106E/F), or Schedule	or cosigner. Make s	ure you have listed the cr G). Use Schedule D, Sch	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill or to whom you owe the debt at apply:
				☐ Schedule G, line _	
	lumber Street			-	
	Sity	State	ZIP Code		
_	lame lumber Street			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐	
	City	State	ZIP Code		

Debtor 1 Gabriela Clopton Galindo Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number (If Nowm) Official Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is neattach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question of the spouse is a separate spage with information. If you have more than one job, attach a separate page with information about addition and proposed information. If you have more than one job, attach a separate page with information. If you have more than one job, attach a separate page with information. Employer's name Employer's name Employer's address Occupation may include student or homemaker, if it applies. How long employed there? *See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-file spouse unless you are separated.	Fill	in this information to identify your c	ase:									
United States Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA Case number (!! known)		·										
Case number (It known) Check if this is:						_						
Official Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is net attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question to the separate page with information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? The Value Describe Employment Information Employer's name Employer's name Employer's address How long employed there? The Value Describe Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. Estimate monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A	Uni	ted States Bankruptcy Court for the	: CENTRAL DISTRICT	OF CALIFORNIA		_						
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you nate a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question as exparate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question information. If you have more than one job, attach a separate page with information about additional employers. Occupation Disability leave Employed See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A \$ N							☐ An am ☐ A supp	ende oleme	ed filing ent showi			napter
Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is need to this form. On the top of any additional pages, write your name and case number (if known). Answer every question a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation Disability leave Employer's name Employer's address Occupation May include student or homemaker, if it applies. How long employed there? *See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you report non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. List monthly gross wages, salary, and commissions (before all payroll 2. List monthly overtime pay. 3. 4\$ 0.00 \$ N/A N/A	\sim	fficial Forms 4001					13 inco	ome a	as of the	following da	ite:	
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If more space is net attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question as separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question as exparate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question as exparate page with information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address How long employed there? *See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. List monthly gross wages, salary, and commissions (before all payroll 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 \$ N/A							MM / E	D/ Y	YYY			
supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more spouse is not your are separated and your spouse is not filing with you, do not include information about your spouse. If more space is net attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question about your spouse. If more space is net attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question about your spouse. If more spouse, if more space is net attach a separate page with information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address Employer's address How long employed there? *See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A N/A												12/15
If you have more than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Employer's name Employer's address	spoi atta	use. If you are separated and you ch a separate sheet to this form.	ır spouse is not filing wi	th you, do not inclu	de infor	matio	n about you	r spc	ouse. If n	nore space	is ne	eded,
attach a separate page with information about additional employers. Occupation Disability leave Employer's name Employer's name Employer's address How long employed there? *See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A N/A	1.			Debtor 1				Debtor 2 or non-filing spouse				
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? *See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-fit spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A N/A	i		Employment status*	☐ Employed				☐ Employed				
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? *See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-file spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A N/A		information about additional	Employment status	■ Not employed				lot e	mployed			
Self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? *See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-fispouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			Occupation	Disability leave								
How long employed there? *See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-file spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			Employer's name									
*See Attachment for Additional Employment Information Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-file spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			Employer's address									
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-file spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			How long employed th		achmen	t for A	Additional E	nplo	yment In	formation		
If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	Par	t 2: Give Details About Mor	nthly Income									
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. S 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	spou	use unless you are separated.		, c					•	•		J
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A				embine the information	n for all e	emplo	yers for that p	erso	on the	lines below.	If you	u need
 deductions). If not paid monthly, calculate what the monthly wage would be. \$ 0.00 \$ N/A Estimate and list monthly overtime pay. \$ 0.00 +\$ N/A 							For Debtor 1				е	
	2.				2.	\$_	0	.00	\$	N/	'A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$ \$ \$	3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0	.00	+\$	N/	<u>'A</u>	
	4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	0.00)	\$_	N/A	-	

Debt	or 1	Gabriela Clopt	on Galindo		_		Case n	umber (if ki	nown)				
							For I	Debtor 1			or Debtor		9
	Cop	y line 4 here			4.		\$	(0.00	\$		N/	
5.	Liet	all payroll deduc								-			
J.	5a.		and Social Secur	ity deductions	5a		\$		0.00	\$		NI/	' A
	5b.		tributions for reti		5b		\$—		0.00	- \$		N/	
	5c.		ributions for retir		5c		\$		0.00	- \$		N/	
	5d.		ments of retirem	-	5d		\$		0.00	- \$		N/	
	5e.	Insurance			5e) .	\$		0.00	\$		N/	
	5f.	Domestic supp	ort obligations		5f.		\$	(0.00	\$		N/	' A
	5g.	Union dues			5g	J.	\$	(0.00	\$		N/	Ά
	5h.	Other deduction	ns. Specify:		5h	1.+	\$	(0.00	+ \$		N/	<u>'A</u>
6.	Add	I the payroll dedu	ctions. Add lines	5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	(0.00	\$		N/	<u>'A</u>
7.	Cal	culate total month	ly take-home pay	. Subtract line 6 from line 4.	7.		\$	(0.00	\$		N/	<u>'A</u>
8.	List 8a.	profession, or f Attach a stateme	m rental property farm ent for each prope y and necessary b	d: and from operating a business, rty and business showing gross rusiness expenses, and the total	8a	۱.	\$	(0.00	\$		N/	/ A
	8b.	Interest and div	ridends		8b).	\$		0.00	- \$		N/	
	8c.	regularly receive Include alimony,	re .	ou, a non-filing spouse, or a dependen child support, maintenance, divorce nt.	t 8c	; .	\$		0.00	\$		N/	
	8d.	Unemployment			8d		\$		0.00	- \$		N/	
	8e.	Social Security	-		8e) .	\$		0.00	\$		N/	
	8f.	Include cash ass that you receive, Nutrition Assista Specify: WC	sistance and the v., such as food star nce Program) or h disability	at you regularly receive alue (if known) of any non-cash assistanc nps (benefits under the Supplemental ousing subsidies.	8f.		\$		2.00	\$		N/	
	8g.	Pension or retir		Maying Health care	8g					. ቅ		N/	
	8h.	Other monthly	income. Specify:	Maxim Healthcare	8h	1.+	\$	700	J.UU	. + Þ		N/	<u>A</u>
9.	Add	l all other income.	. Add lines 8a+8b	+8c+8d+8e+8f+8g+8h.	9.		\$	1,452	2.00	\$	-	N	N/A
10.	Cal	culate monthly inc	come. Add line 7	+ line 9.	10.	\$	1	,452.00	+ \$		N/A	= \$	1,452.00
		-		d Debtor 2 or non-filing spouse.		· -		,				1 '	
11.	othe Do	ude contributions fr er friends or relative	om an unmarried es.	the expenses that you list in Schedule partner, members of your household, you uded in lines 2-10 or amounts that are not	r depe			•		•	n <i>Schedul</i>	e J. +\$ _	0.00
12.		e that amount on the		line 10 to the amount in line 11. The re hedules and Statistical Summary of Certa								\$_	1,452.00
13.	`	•	rease or decreas	e within the year after you file this forn	1?								bined thly income
		No. Yes. Explain:	Debtor cares	for a child with special needs.									
	-	·	Debtor is on o	lisability leave since September 20 ne is receiving on disability. Debto									

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Main Document Page 32 of 58

Debtor 1 Gabriela Clopton Galindo Case numb	per (if known)
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Official Form B 6l Attachment for Additional Employment Information

Debtor		
Occupation	Caregiver	
Name of Employer	Maxim Healthcare	
How long employed	2 years	
Address of Employer	Debtor works remotely	

Official Form 106l Schedule I: Your Income page 3

Fill	in this informa	ation to identify yo	our case.			[
	otor 1			indo		Ch	eck if this is:			
Gabriela Clopton Galindo							An amend	ed filing		
	otor 2								wing postpetition chapte	r
(Spo	ouse, if filing)						rs expens	es as or	the following date:	
Unit	ed States Bank	ruptcy Court for the	: CENTR	AL DISTRICT OF CALIFO	RNIA		MM / DD /	YYYY		
1	e number									
	«: .: . l	4001								
		orm 106J								
		J: Your			- Climan to mathematical	- 41		!!. !		2/1
info	ormation. If m		eded, atta	If two married people and chanother sheet to this form.						
Par	t 1: Desc	ribe Your House	hold							
1.	Is this a join	nt case?								
	■ No. Go to □ Yes. Doe	o line 2. es Debtor 2 live i	in a separa	ate household?						
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.			
2.	Do you hav	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Depend age	lent's	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							Yes	
									□ No □ Yes	
									☐ Yes	
									☐ Yes	
									□ No	
2	Do your ov	nancas inaluda	_		-				☐ Yes	
3.	expenses o	penses include If people other t d your depende	han $_{m au}$	No Yes						
	<u> </u>			_						
exp	imate your ex	a date after the l	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the	value of suc	h assistance an	non-cash (d have ind	government assistance it	you know Your Income		v			
(Of	ficial Form 10)6l.)					T	our exp	enses	
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$		400.00	
	If not include	ded in line 4:								
	4a. Real	estate taxes				4a.	\$		0.00	
		erty, homeowner's				4b.	·		0.00	
				ipkeep expenses		4c.	·		50.00	
5		owner's associat		dominium dues p ur residence , such as hoi	me equity loans	4d. 5.			0.00	

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Main Document Page 34 of 58

Debtor '	Gabriela	Clopton Galindo	Case num	ber (if known)				
S. Uti	lities:							
6a.		heat, natural gas	6a.	\$	0.00			
6b	•	wer, garbage collection	6b.	· -	0.00			
6c.		e, cell phone, Internet, satellite, and cable services	6c.	· .	125.00			
6d.	•		6d.		0.00			
		ekeeping supplies	7.	·	350.00			
		ekeeping supplies children's education costs	7. 8.	\$				
_			o. 9.	*	0.00			
	-	ry, and dry cleaning		\$	75.00			
		products and services	10.	· ·	50.00			
		ntal expenses	11.	\$	75.00			
		Include gas, maintenance, bus or train fare.	12.	\$	150.00			
	not include ca	1 /		·				
		clubs, recreation, newspapers, magazines, and books	13.	•	75.00			
		ributions and religious donations	14.	Φ	0.00			
	surance.	courses deducted from your pay or included in lines 4 or 00						
		surance deducted from your pay or included in lines 4 or 20.	150	¢	0.00			
	a. Life insura		15a.	·	0.00			
	b. Health ins		15b.	·	0.00			
_	c. Vehicle ins		15c.		65.00			
		rance. Specify:	15d.	\$	0.00			
). Ta	xes. Do not in	clude taxes deducted from your pay or included in lines 4 or 20.						
	ecify:		16.	\$	0.00			
		ease payments:						
17	 a. Car payme 	ents for Vehicle 1	17a.	\$	0.00			
17	b. Car payme	ents for Vehicle 2	17b.	\$	0.00			
17	c. Other. Spe	ecify:	17c.	\$	0.00			
17	d. Other. Spe	ecify:	17d.	\$	0.00			
	•	of alimony, maintenance, and support that you did not report as	<u> </u>					
		your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00			
		s you make to support others who do not live with you.		\$	0.00			
Sp	ecify:		19.					
). O tl	her real prop	erty expenses not included in lines 4 or 5 of this form or on Sch	edule I: Yo	our Income.				
		s on other property	20a.		0.00			
	b. Real estat		20b.	\$	0.00			
20	c. Property, h	homeowner's, or renter's insurance	20c.	\$	0.00			
		nce, repair, and upkeep expenses	20d.		0.00			
		er's association or condominium dues	20e.		0.00			
_		ers association of condominatin dues		*				
. Ot	her: Specify:		21.	+\$	0.00			
2. C a	Iculate vour	monthly expenses						
	a. Add lines 4	· ·		\$	1.415.00			
		2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$.,			
					4 445 00			
22	b. Add lifte 228	a and 22b. The result is your monthly expenses.		\$	1,415.00			
3. C a	Iculate vour i	monthly net income.		L				
	-	12 (your combined monthly income) from Schedule I.	23a.	\$	1,452.00			
		monthly expenses from line 22c above.	23b.	· .	1,415.00			
_0			_00.	-	1,713.00			
23	c. Subtract v	our monthly expenses from your monthly income.						
20		is your monthly net income.	23c.	\$	37.00			
	5 100011			L				
4. Do	you expect a	an increase or decrease in your expenses within the year after y	ou file this	form?				
For	or example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a							
		terms of your mortgage?						
	No.							
	Yes.	Explain here:						
	100.	1						

THE SECRET SECTION	estion to identify your			
···	mation to identify your		<u>. </u>	
Debtor 1	Gabriela Clopton First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	CENTRAL DISTRICT	OF CALIFORNIA	
Case number				
(if known)				☐ Check if this is an amended filing
			I Debtor's Sched	
You must file this	e form who nover you f	ile bankruptcy schedule n connection with a bar	onsible for supplying correct info es or amended schedules. Makin nkruptcy case can result in fines	ormation. g a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20
You must file thiobtaining money years, or both. 1	s form whenever you f	ile bankruptcy schedule n connection with a bar	es or amended schedules. Makin-	a false statement, concealing property, or
You must file thiobtaining money years, or both. 1	s form whenever you f or property by fraud i 8 U.S.C. §§ 152, 1341, a n Below	ile bankruptcy schedule n connection with a bar 1519, and 3571.	es or amended schedules. Makin-	g a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20
You must file thiobtaining money years, or both. 1	s form whenever you f or property by fraud i 8 U.S.C. §§ 152, 1341, a n Below	ile bankruptcy schedule n connection with a bar 1519, and 3571.	es or amended schedules. Makin nkruptcy case can result in fines	g a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20
You must file thiobtaining money years, or both. 1 Sign Did you pa	s form whenever you f or property by fraud i 8 U.S.C. §§ 152, 1341, a n Below	ile bankruptcy schedule n connection with a bar 1519, and 3571.	es or amended schedules. Makin nkruptcy case can result in fines	g a false statement, concealing property, or up to \$250,000, or imprisonment for up to 20

Fi	l in this inforn	nation to identify you	r case:								
De	ebtor 1	Gabriela Cloptor	n Galindo								
	10	First Name	Middle Name	Last Name							
1 -	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name							
Ur	nited States Bar	nkruptcy Court for the:	CENTRAL DISTRICT OF	CALIFORNIA							
Ca	ise number										
	mown)				_	theck if this is an mended filing					
						-					
O.	fficial Fo	rm 107									
_			Affairs for Individ	duals Filing for B	ankruptcv	4/19					
					equally responsible for sup	plving correct					
info	ormation. If m		attach a separate sheet to		y additional pages, write you						
	<u> </u>	,									
Pa	-		arital Status and Where You	Lived Before							
1.	What is your	current marital statu	is?								
	☐ Married■ Not mar	ried									
2.	During the la	ng the last 3 years, have you lived anywhere other than where you live now?									
	_										
	_	NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there					
3.					ity property state or territory						
sta	tes and territori	es include Arizona, Ca	lifornia, Idano, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and W	/isconsin.)					
	■ No										
	☐ Yes. Ma	ike sure you fill out Scl	hedule H: Your Codebtors (Of	fficial Form 106H).							
Pa	rt 2 Explai	n the Sources of You	r Income								
4.	Fill in the tota	l amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?					
	□ No										
		in the details.									
	- 163.1111	in the details.									
			Debtor 1	0	Debtor 2	0					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$2,100.00	☐ Wages, commissions, bonuses, tips						
			☐ Operating a business		☐ Operating a business						

Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Case 2:19-bk-14118-BB Page 37 of 58 Case number (if known) Main Document

Debtor 1 Gabriela Clopton Galindo

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar (January 1 to De	r year: ecember 31, 2018)	■ Wages, commissions, bonuses, tips	\$7,700.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
		☐ Wages, commissions, bonuses, tips	\$2,500.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	r year before that: ecember 31, 2017)	■ Wages, commissions, bonuses, tips	\$7,700.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
		☐ Wages, commissions, bonuses, tips	\$12,500.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
Include incom and other put winnings. If yo	ne regardless of wheth blic benefit payments; rou are filing a joint cas	ner that income is taxable. Expensions; rental income; interest and you have income that you	rest; dividends; money collec you received together, list it o	•	
Include income and other put winnings. If you have a characteristic and the control of the contr	ne regardless of wheth blic benefit payments; rou are filing a joint cas	ner that income is taxable. Exa pensions; rental income; inte	rest; dividends; money collec you received together, list it o	ted from lawsuits; royalties; an nly once under Debtor 1.	
Include income and other put winnings. If you have a list each sou	me regardless of wheth blic benefit payments; you are filing a joint cas urce and the gross inco	ner that income is taxable. Expensions; rental income; interse and you have income that your from each source separa	rest; dividends; money collec you received together, list it o	ted from lawsuits; royalties; an nly once under Debtor 1. nat you listed in line 4.	
Include income and other put winnings. If you have a characteristic in the contraction of	me regardless of wheth blic benefit payments; you are filing a joint cas urce and the gross inco	ner that income is taxable. Expensions; rental income; interest and you have income that you	rest; dividends; money collec you received together, list it o	ted from lawsuits; royalties; an nly once under Debtor 1.	
Include income and other put winnings. If you have been sound in the second in the sec	me regardless of wheth blic benefit payments; you are filing a joint cas urce and the gross inco	per that income is taxable. Expensions; rental income; interese and you have income that your from each source separated by the source of income.	rest; dividends; money collectyou received together, list it of tely. Do not include income the dividence of	ted from lawsuits; royalties; an nly once under Debtor 1. nat you listed in line 4. Debtor 2 Sources of income	Gross income (before deductions
Include income and other put winnings. If you have been sound in the second in the sec	ne regardless of wheth blic benefit payments; you are filing a joint cas arce and the gross incomment. I in the details. of current year until d for bankruptcy:	per that income is taxable. Expensions; rental income; interse and you have income that your from each source separation. Debtor 1 Sources of income Describe below.	rest; dividends; money collectyou received together, list it of telly. Do not include income the telly. Do not include income the telly. Gross income from each source (before deductions and exclusions)	ted from lawsuits; royalties; an nly once under Debtor 1. nat you listed in line 4. Debtor 2 Sources of income	Gross income (before deductions
Include income and other put winnings. If you List each sou No Yes. Fill From January 1 the date you filed For last calendar (January 1 to De	me regardless of wheth blic benefit payments; rou are filing a joint cas arce and the gross incommendation of current year until d for bankruptcy: Tryear: Excember 31, 2018)	per that income is taxable. Expensions; rental income; interse and you have income that your from each source separate. Debtor 1 Sources of income Describe below. Disability Disability	rest; dividends; money collectyou received together, list it of tely. Do not include income the tely. Do not include income the tely. Do not include income the tely. Gross income from each source (before deductions and exclusions) \$2,100.00	ted from lawsuits; royalties; an nly once under Debtor 1. nat you listed in line 4. Debtor 2 Sources of income	Gross income (before deductions
Include income and other put winnings. If you be a list each sou list each list each sou list each list ea	me regardless of wheth blic benefit payments; rou are filing a joint cas arce and the gross incoming the details. In the details. of current year until d for bankruptcy: r year: ecember 31, 2018)	per that income is taxable. Expensions; rental income; interse and you have income that your from each source separate. Debtor 1 Sources of income Describe below. Disability Disability Made Before You Filed for	rest; dividends; money collectyou received together, list it of telly. Do not include income the telly. Do not include incl	ted from lawsuits; royalties; an nly once under Debtor 1. nat you listed in line 4. Debtor 2 Sources of income	Gross income (before deductions
Include income and other put winnings. If you be a list each sou list each list each sou list each l	ne regardless of wheth blic benefit payments; rou are filing a joint cas arce and the gross incoming a filing a joint cas arce and the gross incoming a filing a joint cas arce and the gross incoming a filing a joint cas arce and the gross incoming a joint cas arce and the gross incoming a joint case are architectured and the gross incoming a joint case architecture and the gross incoming a joint case architecture and the gross incoming a joint case architecture archite	per that income is taxable. Expensions; rental income; interse and you have income that you me from each source separate. Debtor 1 Sources of income Describe below. Disability Made Before You Filed for 's debts primarily consume	rest; dividends; money collectyou received together, list it of telly. Do not include income the telly. Set included income the telly. Set includes the telly.	ted from lawsuits; royalties; an nly once under Debtor 1. nat you listed in line 4. Debtor 2 Sources of income	Gross income (before deductions and exclusions)
Include income and other put winnings. If you be a list each sou list each list	ne regardless of wheth blic benefit payments; rou are filing a joint cas arce and the gross incoming a filing a joint cas arce and the gross incoming a filing a joint cas arce and the gross incoming the details. of current year until d for bankruptcy: regember 31, 2018) ertain Payments You ebtor 1's or Debtor 2' deither Debtor 1 nor Dedividual primarily for a puring the 90 days befor	Debtor 1 Sources of income Describe below. Disability Made Before You Filed for consumer of the personal, family, or householder you filed for bankruptcy, directions, and the personal, family, or householder you filed for bankruptcy, directions, and the personal of th	rest; dividends; money collecty ou received together, list it of telly. Do not include income the telly. State of the telly of telly of the telly of te	ted from lawsuits; royalties; an nly once under Debtor 1. Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
Include income and other put winnings. If you be a list each sou list each	ne regardless of wheth blic benefit payments; rou are filing a joint cas arce and the gross incoming a filing a joint cas arce and the gross incoming the details. of current year until d for bankruptcy: r year: ecember 31, 2018) ertain Payments You ebtor 1's or Debtor 2' leither Debtor 1 nor Dedividual primarily for a ground the 90 days before the payments of	Debtor 1 Sources of income Describe below. Disability Made Before You Filed for Describe can be primarily consume Describe primarily consume Describe below.	rest; dividends; money collectyou received together, list it of telly. Do not include income the telly. Set included	ted from lawsuits; royalties; an nly once under Debtor 1. Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions) 1(8) as "incurred by an

not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Del	btor 1	Ga	briela	Clopto	n Galindo	Main Doo	cument	Page 3	8 of 5	8 number (<i>if known</i>)		
			Dilcia	Olopio	T GainiaG							
	_											
		Yes.				nave primarily co led for bankrupto			a total c	of \$600 or more	?	
			■ N	o. Go	to line 7.							
			Пγ	inc								creditor. Do not clude payments to an
	Cred	ditor'	s Name	and Ad	dress	Dates of pa	yment	Total amor	unt aid	Amount you still owe	Was this pa	syment for
7.	<i>Inside</i> of wh	<i>er</i> s in nich y siness	clude yo ou are a	our relati an officer	ves; any general, director, person		s of any gen ner of 20% o	eral partners; or more of their	partners voting s	hips of which yo ecurities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for
	_	No										
					s to an insider.	Datasatasa		T-1-1		A	D	4.1
	Insi	der's	Name	and Add	ress	Dates of page	yment	Total amor	unt aid	Amount you still owe	Reason for	this payment
8.	insid	ler?		-		ptcy, did you ma		ments or trar	sfer any	/ property on a	ccount of a d	ebt that benefited an
		NI-										
	_	No Yes.	List all r	payments	s to an insider							
				and Add		Dates of pag	yment	Total amou		Amount you		this payment
								p	aid	still owe	Include cred	litor's name
Pai	rt 4:	Ider	itify Le	gal Actio	ons, Repossessi	ions, and Forecl	osures					
9.	List a	all suc	h matte	ers, includ		ptcy, were you a iry cases, small c						
		No										
		Yes.	Fill in th	ne details								
		e title e nur				Nature of th	e case	Court or ag	jency		Status of th	e case
10.					filed for bankru I in the details be		your prope	erty reposses	sed, for	eclosed, garnis	shed, attached	d, seized, or levied?
			o to lin Fill in th		ation below.							
	Cred	ditor	Name a	and Add	ess	Describe th	e Property			Date		Value of the
						Explain wha	at happened	d				property
11.	acco					ruptcy, did any c ecause you owe		luding a bank	or finar	ncial institutior	n, set off any a	amounts from your
				ne details	•							
	Cred	ditor	Name a	and Add	ress	Describe the	e action the	creditor tool	(Date taker	action was	Amount
12.	cour	t-app				ptcy, was any of r another official		erty in the pos	ssessior	n of an assigne	e for the bene	efit of creditors, a
	_	No										
Offic	ப ial Forn	Yes m 107			Sta	tement of Financia	I Affairs for I	ndividuals Filin	g for Bar	nkruptcy		page 3

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Page 39 of 58 Case number (if known) Main Document

Debtor 1 Gabriela Clopton Galindo

Pa	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift.	, did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift or contrib	y, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy or gambling? No Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster,
	Describe the property you lost and how the loss occurred lnclu	cribe any insurance coverage for the loss and the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	tt 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepa	did you or anyone else acting on your behalf pay aring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	□ No■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Westgate Law 16444 Paramount Blvd Suite 205 Paramount, CA 90723 Justin@westgatelaw.com	\$795 plus ff	2019	\$795.00
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you. No		or transfer any prope	rty to anyone who
	Yes. Fill in the details.	Description and value of any arrange	Data na	A
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Debtor 1 Gabriela Clopton Galindo Main Document Page 40 of 58

Case number (if known)

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Last balance Date account was account number closed, sold, Address (Number, Street, City, State and ZIP instrument before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Do you still Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Case 2:19-bk-14118-BB

Page 41 of 58 Case number (if known) Main Document

Debtor 1 Gabriela Clopton Galindo

toxic substances	, wastes,	or material	into the air,	land, so	il, surface wate	er, groundwater	, or other medi	um, includinց	ગુ statutes oા
regulations contr	olling the	cleanup of	these subs	tances,	wastes, or mate	erial.			

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						
Rep	ort a	II notices, releases, and proceedings th	nat yo	ou know about, regardless of who	en the	ey occurred.	
24.	Has	any governmental unit notified you that	at you	ı may be liable or potentially liab	le und	der or in violation of an environm	ental law?
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit o	f any	release of hazardous material?			
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or ad	minis	strative proceeding under any en	vironi	mental law? Include settlements	and orders.
		No Yes. Fill in the details.					
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Par	t 11:	Give Details About Your Business or	Con	·			
27.	With	nin 4 years before you filed for bankrup	otcy, c	did you own a business or have a	any of	f the following connections to an	y business?
		lacksquare A sole proprietor or self-employed	in a t	rade, profession, or other activity	y, eith	ner full-time or part-time	
		☐ A member of a limited liability com	pany	(LLC) or limited liability partners	hip (L	LLP)	
		☐ A partner in a partnership					
		☐ An officer, director, or managing ex	xecut	ive of a corporation			
		☐ An owner of at least 5% of the votil	ng or	equity securities of a corporation	n		
		No. None of the above applies. Go to	Part '	12.			
		Yes. Check all that apply above and fi	ll in th	he details below for each busines	ss.		
		siness Name dress	Des	scribe the nature of the business	3	Employer Identification number Do not include Social Security	
		mber, Street, City, State and ZIP Code)	Na	me of accountant or bookkeeper		Dates business existed	number of frint.
28.		nin 2 years before you filed for bankrup itutions, creditors, or other parties.	itcy, c	did you give a financial statemen	t to aı	nyone about your business? Incl	ude all financial
		No Yes. Fill in the details below.					
	Na:		Dat	te Issued			

Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. **357**/3. 18 U.S.C. §§ 152, 1341, 1519 Th Signature of Debtor 2 Gabriela Clopton Galinda Signature of Debtor 1 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Main Document

Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Page 42 of 58

Case 2:19-bk-14118-BB

Debtor 1 Gabriela Clopton Galindo

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Des Main Document Page 43 of 58

Fill in this information to identify your case:						
Debtor 1	Gabriela Clopton	Galindo				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA			
Case number					☐ Check if this is an	
					amended filing	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.
- You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
- · · ·		_
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a	☐ Yes
property	Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:	The Retail Title property and [explain].	
scouring dest.		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
	☐ Retain the property and enter into a	☐ Yes
Description of	Reaffirmation Agreement.	
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	Common don the constraint.	□ No
name:	☐ Surrender the property.	□ NO
name.	Retain the property and redeem it.	☐ Yes
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	□ 163
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Main Document Page 44 of 58

Debtor 1	Gabriela Clopton Galindo	Case number (if known)	
name: Descrip property securing	y	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
For any ur in the info	rmation below. Do not list real estate leases	ses sted in Schedule G: Executory Contracts and Unexpired s. Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Main Document Page 45 of 58

Debtor 1	Gabriela Clopton Galindo	Case number (if known)
Part 3:	Sign Below	
Jnder pe property	enalty of perjury, I declare that I have indicated my intention that is subject to universely lease.	about any property of my estate that secures a debt and any personal
X <u>G</u> a	briela Clopton Galindo	X Signature of Debtor 2
	nature of Debto 1	

Best Case Bankruptcy

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc

B2030 (Form 2030) (12/15)

Page 50 of 58 Main Document

United States Bankruptcy Court Central District of California

In re	Gabriela Clopton Galindo		Case No.		
		Debtor(s)	Chapter	_7	
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	NEY FOR DE	BTOR(S)	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 impensation paid to me within one year before the file rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy, or	or agreed to be paid	to me, for services	at endered or to
	For legal services, I have agreed to accept			795.00	
	Prior to the filing of this statement I have received]	\$	795.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
_		ish and ask and ask as a same of	mlass thou are mami	have and accordates	of my law firm
	I have not agreed to share the above-disclosed con				
[I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n	sation with a person or persons whatened in the cames of the people sharing in the cames.	ho are not members compensation is atta	or associates of my ched.	law firm. A
6. I	rcturn for the above-disclosed fee, I have agreed to	render legal service for all aspects	of the bankruptcy of	ase, including:	
b	Preparation and filing of any petition, schedules, st Representation of the debtor at the meeting of cred [Other provisions as needed]	atement of affairs and plan which itors and confirmation hearing, and	may be required; d any adjourned hea	rings thereof;	
7. E	y agreement with the debtor(s), the above-disclosed a Representation of the debtors in any dany other adversary proceeding. Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on h	lischargeability actions, judic reduce to market value; exe ions as needed; preparation	ial lien avoidanc mption planning:	preparation and	filing of
		CERTIFICATION			11. / \ /
I this ba	certify that the foregoing is a complete statement of a nkruptcy proceeding.	D. Justin Harelik 2 Signature of Attorney Westgate Law 16444 Paramount Suite 205 Paramount, CA 90 (818)200-1495 Fa justin@westgatela	236710 Avenue 9723 x: (818)574-6022	epresentation of the	geotor(s) in

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Main Document Page 51 of 58

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address D. Justin Harelik 236710 16444 Paramount Avenue Suite 205 Paramount, CA 90723 (818)200-1495 236710 CA (818)574-6022 justin@westgatelaw.com	FOR COURT USE ONLY				
	ANKRUPTCY COURT CT OF CALIFORNIA				
In re: Gabriela Clopton Galindo	Case No.: CHAPTER: 7				
Debtor(s).	DEBTOR'S ATTORNEY'S DISCLOSURE OF COMPENSATION ARRANGEMENT IN INDIVIDUAL CHAPTER 7 CASE [LBR 2090-1(a)(3)]				
 Compensation Arrangement. Pursuant to 11 U.S.C. § 329(I disclose that: a. I am the attorney for the Debtor. b. Compensation that was paid to me, within one year beforendered or to be rendered on behalf of the Debtor in follows: i. For legal services, I have agreed to accept □ an hour ii. Prior to filing this disclosure I have received \$ 795.0 iii. The balance due is \$0.00 	ore the petition was filed, or was agreed to be paid to me, for services contemplation of or in connection with this bankruptcy case, is as the same of \$ or a = flat fee of \$				
2. \$ 335.00 of the filing fee has been paid.					
Source of Compensation Paid Postpetition (Postpetition Compensation). a. Already Paid. The source(s) of the Postpetition Compensation paid to me was: Debtor Other (specify): b. To be Paid. The source(s) of the Postpetition Compensation to be paid to me is: Debtor Other (specify):					
4. Sharing of Compensation Paid Postpetition.					
 I have not agreed to share Postpetition Compensation with any other person unless they are members or regular associates of my law firm within the meaning of FRBP 9001(10). I have agreed to share Postpetition Compensation with other person or persons who are not members or regular associates of my law firm within the meaning of FRBP 9001(10). Attached as Exhibit A is a copy of the agreement and a list of the names of the people sharing in the Postpetition Compensation. 					

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc Main Document Page 52 of 58

5	Limited Scope of Services. A limited scope of appearance is permitted under LBR 2090-1(a)(3), unless otherwise required by the presiding judge. In return for the fee disclosed above, I have agreed to provide the required legal services indicated below in paragraph "a", and, if any are indicated, the additional services checked in paragraph "4.b".
	 Services required to be provided: ii. Preparation and filing of any petition, lists, schedules and statements and any other required case commencement documents; and
	iii. Representation of the Debtor at the initial § 341(a) meeting of creditors.
	b. Additional legal services I will provide:
	i. Any proceeding related to relief from stay motions.
	ii. Any proceeding involving an objection to the Debtor's discharge pursuant to 11 U.S.C. § 727.
	iii. Any proceeding to determine whether a specific debt is nondischargeable under 11 U.S.C. § 523.
	iv. Reaffirmation of a debt.
	v. ☐ Any lien avoidance under 11 U.S.C. § 522(f)
_	vi. □ Other (<i>specify):</i> S. If in the future I agree to represent the Debtor in additional matters, I will complete and file the Attorney's Disclosure of
6	Postpetition Compensation, LBR form F 2016-1.4.ATTY.COMP.DISCLSR.
_	DECLARATION OF ATTORNEY FOR THE DEBTOR
-	I declare under penalty of perjury that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the Debtor in this bankruptcy case Date: Signature of attorney for the Debtor
	D. Justin Harelik 236710
	Printed name of attorney
	Westgate Law
	Printed name of law firm
Γ	DECLARATION OF THE DEBTOR
	I/we declare under penalty of perjury that my attorney has explained to me/us the limited scope of representation as outlined above. I/we understand that I/we have paid or agreed to pay solely for the required services listed in paragraph 4a, and the additional services (if any) that are checked off in paragraph 4b above, and that I/we am representing myself/ourselves for any other proceedings unless a new agreement is reached with an attorney.
ļ	Date: 4/11/19 Date:
	Signature of Debtor 1 Signature of Debtor 2 (Joint Debtor) (if applicable) Gabriela Clopton Galindo
	Printed name of Debtor 1 Printed name of Debtor 2
1	

Fill i	n this infor	nation to identify your case:						irected in this form and	in Form
Deb	tor 1	Gabriela Clopton Galindo			12	22A-1Sup	p:		
Debi	tor 2 se, if filing)					■ 1. The	ere is no pres	umption of abuse	
Unite	ed States E	Bankruptcy Court for the: Central District of C	California	a		ар	plies will be n	o determine if a presunade under <i>Chapter 7</i>	
Case (if kno	e number					_		icial Form 122A-2).	
(ii itiic	•••••							does not apply now by service but it could ap	
						☐ Che	ck if this is a	n amended filing	
Off	icial F	orm 122A - 1						_	
Ch	apter	7 Statement of Your Cur	rent	Mor	nthly Inc	come			12/1
attach case i qualif Part	n a separate number (if I ying militar	and accurate as possible. If two married people as sheet to this form. Include the line number to w known). If you believe that you are exempted fror y service, complete and file Statement of Exemp Iculate Your Current Monthly Income	hich the a n a presu tion from	additior mption	nal information of abuse beca	applies. C use you d	n the top of a not have prin	ny additional pages, wri narily consumer debts o	te your name and or because of
1.	_ `	our marital and filing status? Check one on	ıy.						
		arried. Fill out Column A, lines 2-11.							
	_	d and your spouse is filing with you. Fill ou			,	3 2-11.			
		d and your spouse is NOT filing with you.		•	•			2.44	
	☐ Livi per	ng in the same household and are not legang separately or are legally separated. Fill of alty of perjury that you and your spouse are lead apart for reasons that do not include evading	out Colur egally se	nn A, li parated	nes 2-11; do n d under nonba	ot fill out on the other of the	Column B. By aw that applic	checking this box, yo	
10 th	11(10A). For e 6 months,	rage monthly income that you received from all a example, if you are filing on September 15, the 6-m add the income for all 6 months and divide the total the same rental property, put the income from that p	onth perio by 6. Fill i	d would n the re	be March 1 thro sult. Do not inclu	ough Augus ide any inc	st 31. If the amo	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
						Column Debtor		Column B Debtor 2 or non-filing spouse	
2.	Your grospayroll de	ss wages, salary, tips, bonuses, overtime, a ductions).	and com	missio	ons (before all	\$	700.00	\$	
3.		and maintenance payments. Do not include is filled in.	payment	ts from	a spouse if	\$	0.00	\$	
4.	of you or from an u and room	nts from any source which are regularly payour dependents, including child support. married partner, members of your household mates. Include regular contributions from a spont include payments you listed on line 3.	Include , your de	regular epende	contributions nts, parents,	\$	0.00	\$	
5.	Net incor	ne from operating a business, profession,	or farm						
			¢.	0.00	otor 1				
		eipts (before all deductions)	\$ -\$	0.00					
		and necessary operating expenses	· —		Copy here -:	. ¢	0.00	\$	
c		nly income from a business, profession, or farm	пъ	0.00	Jopy Heid -		3.00	Ψ	
6.	Net incor	ne from rental and other real property		Deh	otor 1				
	Gross rec	eipts (before all deductions)	\$	0.00					
		and necessary operating expenses	-\$	0.00					
		nly income from rental or other real property	\$ 		Copy here -:	> \$	0.00	\$	

Official Form 122A-1

7. Interest, dividends, and royalties

\$

0.00

Case 2:19-bk-14118-BB Doc 1 Filed 04/11/19 Entered 04/11/19 09:56:06 Desc

Case number (if known)

Main Document Page 54 of 58

					Column A Debtor 1		Column B Debtor 2 or non-filing s		
8. L	Jnemploy	ment compensation			\$	0.00	\$		
		er the amount if you contend that the amour Security Act. Instead, list it here:	nt received was a benef	fit under					
	For you	9	0.0	00					
		spouse	S						
		r retirement income. Do not include any ar ler the Social Security Act.	mount received that wa	s a	\$	0.00	\$		
r d	o not incle eceived as	om all other sources not listed above. Spude any benefits received under the Social is a victim of a war crime, a crime against huberrorism. If necessary, list other sources on it.	Security Act or paymen manity, or international	nts or					
	. D	isability			\$	750.00	\$		
					\$	0.00	\$		
	To	otal amounts from separate pages, if any.		+	\$	0.00	\$		
е	ach colum	your total current monthly income. Add linn. Then add the total for Column A to the to	otal for Column B.	\$	1,450.00	+ \$		Total incom	1,450.00
2 12. C		ermine Whether the Means Test Applies							
1	2a. Copy	your total current monthly income from line	11		Сор	y line 11 h	ere=>	\$	1,450.00
	Multip	ly by 12 (the number of months in a year)						X	12
12b. The result is your annual income for this part of the form						12b.	\$	17,400.00	
13. C	Calculate 1	the median family income that applies to	you. Follow these step	os:					
F	ill in the s	tate in which you live.	СА						
F	ill in the n	umber of people in your household.	1						
Fill in the median family income for your state and size of household.							13.	\$	57,962.00
		st of applicable median income amounts, gon. This list may also be available at the banl		pecified	in the separ	ate instruct	ions		
14. F	low do th	e lines compare?							
1	4a. ■	Line 12b is less than or equal to line 13. C Go to Part 3.	On the top of page 1, ch	eck box	1, There is	no presum	ption of abuse) .	
1	4b. □	Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pr	esumption o	f abuse is o	determined by	Form 1	22A-2.

Gabriela Clopton Galindo

Debtor 1

Debtor 1	Gabriela Clopton Galindo	Case number (if known)
Part 3:	Sign Below	
	By signing here t decibie under penalty of perjury that the	e information on this statement and in any attachments is true and correct.
	Gabriela Clopton Galindo Signature of Deport 1	
Da	ate <u>64////9</u> MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A	-2.
	If you checked line 14b, fill out Form 122A-2 and file it wit	th this form.

Case 2:19-bk-14118-BB Doc 1 File Main Docum	d 04/11/19 Entered 04/11/19 09:56:06 Desc
Attorney or Party Name, Address, Telephone & FAX No State Bar No. & Email Address D. Justin Harelik 236710 16444 Paramount Avenue Suite 205 Paramount, CA 90723 (818)200-1495 Fax: (818)574-6022 California State Bar Number: 236710 CA justin@westgatelaw.com	nent Page 56 of 58 ps., FOR COURT USE ONLY
□ Debtor(s) appearing without an attorney ■ Attorney for Debtor	
= Austrioy for Debtor	
	ES BANKRUPTCY COURT STRICT OF CALIFORNIA
In re: Gabriela Clopton Galindo	CASE NO.: CHAPTER: 7
	VERIFICATION OF MASTER MAILING LIST OF CREDITORS
	[LBR 1007-1(a)]
Debtor(s	3).
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's master mailing list of creditors filed in this bankruptcy carconsistent with the Debtor's schedules and I/we assume Date:	attorney if applicable, certifies under penalty of perjury that the ase, consisting of 2 sheet(s) is complete correct, and e all responsibility for errors and ornissions. Signature of Debtor 1
Date:	Signature of Debtor 2 (joint debtor)) (if applicable) Signature of Attorney for Debtor (if applicable)

Gabriela Clopton Galindo 1020 South Mountain Avenue, #26 Monrovia, CA 91016

D. Justin Harelik Westgate Law 16444 Paramount Avenue Suite 205 Paramount, CA 90723

Cach Llc/resurgent Cap C/o Resurgent Capital Services Greenville, SC 29602

Cavalry Portfolio Serv 500 Summit Lake Drive Valhalla, NY 10595

Chase Card Po Box 15369 Wilmington, DE 19850

Citicards Cbna Po Box 6217 Sioux Falls, SD 57117

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Lvnv Funding Llc C/o Resurgent Capital Services Greenville, SC 29602 Macys/dsnb Po Box 8218 Mason, OH 45040

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108

National Credit Adjust 327 W 4th Ave Hutchinson, KS 67501

Portfolio Recov Assoc 120 Corporate Blvd Ste 1 Norfolk, VA 23502

Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440

Uscb America 355 S Grand Ave Ste 3200 Los Angeles, CA 90071